

COUNTY OF MONO  
**ORDER TO DRAW WARRANT**

VENDOR # : \_\_\_\_\_  
INVOICE # : \_\_\_\_\_  
AMOUNT : \_\_\_\_\_  
FUND : \_\_\_\_\_  
DATE : \_\_\_\_\_

PAYABLE TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DESCRIPTION: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
AUTHORIZED SIGNATURE

\_\_\_\_\_  
AUDITOR/CONTROLLER